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Fill in this information to identify your ca	se:	
United States Bankruptcy Court for the: <u>District of New Jersey</u>		
Case number (<i>If known</i>): 22-15547	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this amended filin

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your	<u>Carolyn</u> First name L	First name
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Brooks Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden	First name	First name
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>4</u> <u>6</u> <u>4</u> <u>4</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 Carolyn	L Brooks	Case number (if known) 22-15547
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used	☑I have not used any business names or EINs	s.
	in the last 8 years Include trade names and doing business as names	Business name	Business name
		Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		249 Hillcrest Ave.	
		Number Street	Number Street
		Trenton, NJ 08618	<u> </u>
		City State ZIP (Code City State ZIP Code
		Mercer County	County
		If your mailing address is different from the or fill it in here. Note that the court will send any n you at this mailing address.	
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP 0	Code City State ZIP Code
6.	Why you are choosing this	Check one:	Check one:
	district to file for bankruptcy	Over the last 180 days before filing this pet have lived in this district longer than in any district.	
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	I have another reason. Explain. (See 28 U.S.C. § 1408)
			<u> </u>

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Debt	tor 1 <u>Carolyn</u>	L	Brooks	Case	number (if known) 22-15547	
	First Name	Middle Name	Last Name			
Part	t 2: Tell the Court About Yo	ur Bankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are choosing to file under			see <i>Notice Required by 11 U.</i> o of page 1 and check the app	S.C. § 342(b) for Individuals Filing for propriate box.	
8.	How you will pay the fee	details about he check, or mone; a credit card or I need to pay the to Pay The Filin I request that m judge may, but i official poverty I choose this opti	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more letails about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals of Pay The Filing Fee in Installments</i> (Official Form 103A). request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a code may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 03B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	✓ No. ☐ Yes. District District District		WhenWhenWhenWhenWM / DD / YYWhenWM / DD / YY	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	District		MM / DD / YYYY	Case number, if known Relationship to you Case number, if known	
11.	Do you rent your residence?	☐ No. G	landlord obtained an evi So to line 12.		gainst You (Form 101A) and file it	

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Deb	tor 1 <u>Carolyn</u>	L		Brooks		Case number (if known) 22-15547			
	First Name	Middle	Name	Last Name					
Par	t 3: Report About Any Busi	nesses	You Own as	a Sole Proprietor					
12.	Are you a sole proprietor of	☑ No	o. Go to Part 4.						
	any full- or part-time business?	☐ Ye	es. Name and lo	cation of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a	_	Name of business, if any						
	corporation, partnership, or LLC.	Νι	umber Stree	et					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this	_							
	petition.	Ci	ty		State	ZIP Code			
		C	Check the appropriate box to describe your business:						
			Health Care E	Business (as defined in 11	U.S.C. § 101(27	A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))						
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		☐ None of the above							
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed debtor of ope	ed under Subcha r or you are choo	apter V so that it can set apposing to proceed under Sulow statement, and federal i	opropriate deadle ochapter V, you	ou are a small business debtor or a debtor choosing to nes. If you indicate that you are a small business nust attach your most recent balance sheet, statement or if any of these documents do not exist, follow the			
	For a definition of small business	, 🗹 N	o. I am not f	filing under Chapter 11.					
	debtor, see 11 U.S.C. § 101(51D).		o. I am filing Bankrupto		m NOT a small b	usiness debtor according to the definition in the			
		☐ Ye				lebtor according to the definition in the nder Subchapter V of Chapter 11.			
		☐ Ye		g under Chapter 11, I am a d I choose to proceed und		to the definition in § 1182(1) of the Bankruptcy of Chapter 11.			

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Debt	or 1	Carolyn	L	Brooks		Case number (if known) 22-15547
		First Name	Middle Nam	e Last Name		
Part	: 4: Report	if You Own or Ha	ave Any H	azardous Property or	Any Proper	erty That Needs Immediate Attention
14.	-	or have any at poses or is	✓ No.			
	imminent ar	ose a threat of nd identifiable ublic health or	☐ Yes.	What is the hazard?		
	safety? Or do you own any property that needs immediate attention?			If immediate attention is	needed, why is	v is it needed?
	that must be	, do you own oods, or livestock fed, or a building rgent repairs?				
				Where is the property?	Number	Street
					City	State ZIP Code

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Debtor 1 Carolvn **Brooks** Case number (if known) 22-15547 Middle Name First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court whether you About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): have received a briefing about credit counseling. The law requires that you You must check one: You must check one: receive a briefing about credit I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling counseling before you file for agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy bankruptcy. You must truthfully petition, and I received a certificate of completion. petition, and I received a certificate of completion. check one of the following choices. If you cannot do so, Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, you are not eligible to file. that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling If you file anyway, the court agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy can dismiss your case, you will petition, but I do not have a certificate of completion. petition, but I do not have a certificate of completion. lose whatever filing fee you paid, and your creditors can Within 14 days after you file this bankruptcy petition, you Within 14 days after you file this bankruptcy petition, you begin collection activities MUST file a copy of the certificate and payment plan, if any. MUST file a copy of the certificate and payment plan, if any. again. I certify that I asked for credit counseling services from an I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the circumstances merit a 30-day temporary waiver of the requirement. requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. ■ I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. I am currently on active military duty in Active duty. I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of credit counseling with the court. credit counseling with the court.

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Deb	tor 1	Carolyn	L	Brooks		Case	number	(if known) 22-15547	
		First Name	Middle N	ame Last Name					
Par	t 6: Answ	er These Ouestio	ns for Re	eporting Purposes					
· ai	7 (113)	CI 111030 Q Q 03110	113 101 111	pporting r di posos					
16.	16. What kind of debts do you have?			Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.					
			16c.	State the type of debts you ov	ve th	nat are not consumer debts or bu	isiness d	lebts.	
17.	Are you fil	ing under Chapter 7	? ☑	No. I am not filing under Cha	apte	r 7. Go to line 18.			
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt propadiministrative expenses are paid that funds will be available to distribution to unsecured creditors?									
18.		creditors do you at you owe?	1	1-49	0	25,001-50,000 50,0	00-100,0	000	
19.	How much assets to b	do you estimate yo e worth?	ur 🗆 💆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much liabilities to	do you estimate yo o be?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Par	t 7: Sign E	Below							
Fo	r you	If I hav States If no at have o I reque I under	e chosen to Code. I ur torney rep btained an est relief in estand make ptcy case	to file under Chapter 7, I am available understand the relief available understand the and I did not pay on the read the notice required by accordance with the chapter oxing a false statement, conceal	ware nder or ag 11 U of title	reach chapter, and I choose to puree to pay someone who is not a .S.C. § 342(b). e 11, United States Code, specifiproperty, or obtaining money or p	nder Charoceed unan attorniced in this property	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.	
		×		yn L Brooks Brooks, Debtor 1					
			•	on <u>08/01/2022</u>					

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Debtor 1	Carolyn	L	Brooks	Case number (if known) <u>22-15547</u>
	First Name	Middle Name	Last Name	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligil 2(b) and, in a case in which	this petition, declare that I have informed the debtor(s) about eligibility to fittle 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		Y (-/)-((o E. Jouldon	D-4- 00/04/0000
			y E. Jenkins of Attorney for Debtor	Date <u>08/01/2022</u> MM / DD / YYYY
		Firm name	me <mark>k Clayman</mark>	
		Audubon		NJ 08106
		City		State ZIP Code
		Contact ph	one <u>(856) 546-9696</u>	Email address mail@jenkinsclayman.com
		Bar numbe	er	State

Case 22-15547-CMG Doc 11 Filed 08/01/22 Entered 08/01/22 13:57:29 Desc Main Fill in this information to identify your case and this filing: Debtor 1 **Brooks** Carolyn Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **District of New Jersey** ☐ Check if this is an Case number amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once, If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1: 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? 1.1 249 Hillcrest Ave. What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the Street address, if available, or other description amount of any secured claims on Schedule D: Creditors ✓ Single-family home Who Have Claims Secured by Property. Duplex or multi-unit building Current value of the Current value of the ☐ Condominium or cooperative entire property? portion you own? ■ Manufactured or mobile home Trenton, NJ 08618 \$142,500.00 \$142,500.00 ZIP Code ☐ Land State Investment property Describe the nature of your ownership interest Mercer ☐ Timeshare (such as fee simple, tenancy by the entireties, or a County life estate), if known. Other . Residence Who has an interest in the property? Check one. Debtor 1 only

Check if this is community property

\$142,500.00

(see instructions)

Debtor 2 only

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

☐ Debtor 1 and Debtor 2 only

property identification number:

■ At least one of the debtors and another

Other information you wish to add about this item, such as local

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\$1,500.00

Baseball coin collection \$500 Baseball Card Collection \$1,000

✓ Yes. Describe......

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First Name Middle Name Last Name

Carolyn L Case number (if known) 22-15547

Case number (if known) 22-15547

9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe Bicycle	\$900.00
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ No ☐ Yes. Describe	
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe	\$300.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	\$800.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 1 dog	<u>unknown</u>
14.	Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe	
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here Describe Your Financial Assets	\$8,000.00
Do	you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No ☐ Yes	

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Case number (if known) 22-15547 Debtor 1 Carolyn Middle Name First Name Last Name 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Nο **☑** Yes..... Institution name: \$600.00 17.1. Checking account: Wells Fargo \$0.00 17.2. Savings account: Wells Fargo 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **√**1 No ☐ Yes..... Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **☑** No Yes. Give specific information about them..... Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **√** No Yes. Give specific information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension plan: Pension is not part of the estate unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

√ No

☐ Yes.....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

√ No

☐ Yes.....

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Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company

of each policy and list its value....

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☐ Yes. Describe......

Doc 11

Case 22-15547-CMG Doc 11 Filed 08/01/22 Entered 08/01/22 13:57:29 Desc Main Page 15 of 55 Document Case number (if known) 22-15547 Debtor 1 Carolyn First Name Middle Name Last Name 42. Interests in partnerships or joint ventures **√** No ☐ Yes. Describe...... 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 44. Any business-related property you did not already list **√** No ☐ Yes. Give specific information..... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here...... \$0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ Yes..... 48. Crops-either growing or harvested **√** No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **√** No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed **√** No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list **✓** No Yes. Give specific information..... Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... \$0.00

Describe All Property You Own or Have an Interest in That You Did Not List Above

Filed 08/01/22 Entered 08/01/22 13:57:29 Case 22-15547-CMG Doc 11 Desc Main Page 16 of 55 Document Case number (if known) 22-15547 Debtor 1 Carolyn Middle Name First Name Last Name 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **√** No ☐ Yes. Give specific information..... 54 Add the dollar value of all of your entries from Part 7. Write that number here...... \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$142,500.00 Part 2: Total vehicles, line 5 \$6,000.00 56. Part 3: Total personal and household items, line 15 \$8,000.00 57. Part 4: Total financial assets, line 36 \$600.00 58. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Copy personal property total \$14,600.00 Total personal property. Add lines 56 through 61..... \$14,600.00 \$157,100.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Fill in this information to identify your case:						
Debtor 1	Carolyn	L	Brooks			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankı	ruptcy Court for the:	District of New Jersey				
Case number	22-1554	17				
(if known)		_				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt							
Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. 1. □ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
Brief description of the property and line on Schedule A/B that lists this property								
	Copy the value from Schedule A/B	Check only one box for each exemption.						
Brief description: 249 Hillcrest Ave. Trenton, NJ 08618 Line from Schedule A/B: 1.1	\$142,500.00	\$19,250.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)					
Brief description: Household goods Line from Schedule A/B: 6	\$3,000.00	\$3,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)					
3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) 1 No 1 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? 1 No 1 Yes								

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Debtor 1 Case number (if known) 22-15547 Carolyn **Brooks** First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Specific laws that allow exemption Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ 11 U.S.C. § 522(d)(3) \$1,500.00 \$1,500.00 Electronics ☐ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: 11 U.S.C. § 522(d)(5) \$1,500.00 \$1,500.00 Baseball coin collection \$500 Baseball Card 100% of fair market value, up Collection \$1,000 to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) \$900.00 Bicycle ☐ 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) \$300.00 \$300.00 Clothes ☐ 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: Brief description: 11 U.S.C. § 522(d)(4) \$800.00 \$800.00 Jewelry ☐ 100% of fair market value, up I ine from to any applicable statutory limit Schedule A/B: Brief description: 11 U.S.C. § 522(d)(5) \$600.00 Wells Fargo 100% of fair market value, up Checking account to any applicable statutory limit

Line from
Schedule A/B:
Brief description:

Wells Fargo

Line from Schedule A/B:

Savings account

17

\$0.00

100% of fair market value, up

to any applicable statutory limit

11 U.S.C. § 522(d)(5)

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Debtor 1	Carolyn	L	Brooks	Case number	er (if known) <u>22-15547</u>
	First Name	Middle Name	Last Name		
Part 2: Additi	onal Page				
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:				√ \$8 025	44 11 0 0 0 5 500(-1)(5)
Worker's comp o	ase, Sam Gaylor	d Esq. is the	unknown	\$8,025 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	33			-t	
Ochedale A/B.				\$27,900	11 U.S.C. § 522(d)(11)(D)
				100% of fair market value, up to any applicable statutory limit	
				☑ Entire Amount	11 U.S.C. § 522(d)(11)(E)
				☐ 100% of fair market value, up to any applicable statutory limit	

Residence Threshold 142,500

- 14,250

128,250

-109,000 (MRTG) 19,250 d1

0

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			Document	Page 20 of 55	; ;		
Fill in this information	n to identify your case:						
Debtor 1	Carolyn First Name	L Middle Name	Brooks Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bank	ruptcy Court for the:		District of New	Jersey			
Case number (if known)	22-15547					Check if amended	
Official Form	106D				•		
Schedule I	D: Creditors	s Who H	lave Claii	ms Secured	d by Prope	erty	12/15
Yes. Fill in all of Part 1: List All S 2. List all secured separately for each	the information below.	s more than one one creditor has	e secured claim, lis s a particular claim	, list the other	g else to report on the Column A Amount of claim Do not deduct the value of	Column B Value of collateral that supports this	Column C Unsecured portion If any
					collateral.	claim	ii ariy
2.1 CREDIT UNION Creditor's Name PO BOX 7921 Number Str Trenton, NJ 086 City	reet	2013 GN (Son is compared apply.	date you file, the cla	urrent)	\$11,220.00	\$6,000.00	\$5,220.00
Who owes the o	lebt? Check one.	☐ Contin	•				
Debtor 2 only	<i>'</i>	Disput					
Debtor 1 and	,		lien. Check all that				
another	of the debtors and		reement you made ured car loan)	(such as mortgage			
Check if this community of	claim relates to a debt	☐ Statuto	ory lien (such as tax	clien, mechanic's			

Date debt was incurred

☐ Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number ___

Add the dollar value of your entries in Column A on this page. Write that number here:

\$11,220.00

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Debtor 1	Carolyn	L		Brooks		Case numb	er (if known) 22-1554	17
	First Name	Middle Name		Last Name	_			
Part 1:	Additional Page After listing any ei 2.3, followed by 2.			number them b	eginning with	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Mortgage	De	scribe t	ne property that s	ecures the claim:	\$109,000.00	\$142,500.00	\$0.00
Creditor's 1050 Wo	Name <u>Dodward Avenue</u> Street		Mortgage on Residence (\$1,196/mo current)					
Detroit, City	MI 48226 State Z	As IP Code app		te you file, the clai	im is: Check all that			
	es the debt? Check or		Conting	ent				
✓ Debto	or 1 only		Unliquio	ated				
Debto	or 2 only		Dispute	d				
Debto	or 1 and Debtor 2 only	Na	ture of I	en. Check all that	apply.			
At lea	st one of the debtors a er	and 🗹	An agre	ement you made (ed car loan)	(such as mortgage			
	k if this claim relates t nunity debt	o a 🔲	Statutor lien)	y lien (such as tax	lien, mechanic's			
Date deb	t was incurred		Judgme	nt lien from a laws	suit			
			Other (i	ncluding a right to	offset)			
		La	st 4 digi	s of account num	nber			
Add the	dollar value of your e	ntries in Columi	A on th	is page. Write tha	at number here:	\$109.00	00.00	
If this is here:	the last page of your	form, add the do	ollar valu	e totals from all p	pages. Write that numl	ber \$120.22	20.00	

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Ouse	22 13547 OW	0 00011	Document Page 2	22 of 55	10.01.20	DC30 1	naii i	
Fill in this information	n to identify your case	:						
Debtor 1	Carolyn First Name	L Middle Name	Brooks Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bank	ruptcy Court for the:		District of New Jersey					
Case number (if known)	22-15547	·				Check if the amended		
Official Form		0 m 0 \ \ \ \ \ \ = 0	Have Unsecur					
ochedule i	_/i . Crearti	JIS VVIIO	Have Offsecur				12/	/15
Part 1: List All o 1. Do any creditor No. Go to P	e D: Creditors Who Ho Attach the Continuat f Your PRIORITY U s have priority unsec	old Claims Secuion Page to this Jnsecured Cla		is needed, copy the Part	t you need, fill	it out, númb	er the entries	
List all of your p claim listed, ider amounts. As mu fill out the Contil	ntify what type of clain ich as possible, list the nuation Page of Part 1	n it is. If a claim he claims in alphal . If more than or	r has more than one priority unso has both priority and nonpriority betical order according to the cru he creditor holds a particular clai tructions for this form in the instru	amounts, list that claim h editor's name. If you have im, list the other creditors	ere and show be more than two	ooth priority	and nonpriority	
						riority mount	Nonpriority amount	
2.1 IRS Priority Creditor' PO Box 7346			Last 4 digits of account nun When was the debt incurred		\$600.00	\$600.0		<u>10</u>
Number Philadelphia City	Street , PA 19101 State	ZIP Code	As of the date you file, the capply. Contingent	laim is: Check all that				
Who incurred Debtor 1 o	the debt? Check one only		UnliquidatedDisputed					
Debtor 2 o	only		Type of PRIORITY unsecure	ed claim:				

Domestic support obligations

government

Other. Specify

Taxes and certain other debts you owe the

Claims for death or personal injury while you were intoxicated

☐ Yes

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?
☑ No

☐ At least one of the debtors and another

lacksquare Check if this claim is for a community debt

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5 1			· ·	23 01 33
Debtor 1	<u>Carolyn</u> First Name	L Middle Name	Brooks Last Name	Case number (if known) 22-15547
	1			
Part 2:	List All of Your NONP	RIORITY Unsecure	ed Claims	
3. Do a 1. List unse 1. If Con 4.1 A No 2' Nu P Cit	any creditors have nonprior No. You have nothing to represent the creditor of your nonpriority unsubstitution of your nonpriority unsubstitution of your nonpriority unsubstitution of page of Part 2. March State State	rity unsecured claims port in this part. Submit ecured claims in the ar separately for each class a particular claim, liss as a particular cla	against you? Ithis form to the court with you liphabetical order of the creditalm. For each claim listed, idet the other creditors in Part 3. Last 4 digits of When was the company of the date you contingent Unliquidated Disputed Type of NONPR Student load	itor who holds each claim. If a creditor has more than one nonpriority entify what type of claim it is. Do not list claims already included in Part If you have more than three nonpriority unsecured claims fill out the Total claim \$500.00 Bebt incurred? Out file, the claim is: Check all that apply.
	Check if this claim is for the claim subject to offset?	s and another a community debt	divorce that	ify n
	enpriority Creditor's Name		Last 4 digits of	account number \$754.00
P Nu S Cit	O BOX 6497 Imber Street ioux Falls, SD 57117 y ho incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	ly	Contingent Unliquidated Disputed Type of NONPR Student loan Obligations divorce that	ou file, the claim is: Check all that apply. IORITY unsecured claim: ns arising out of a separation agreement or you did not report as priority claims
✓	the claim subject to offset?		Debts to pe similar debt Other. Spec	ify
No P Nu S Cit	apital One Inpriority Creditor's Name O Box 31293 Imber Street alt Lake City, UT 84131 y ho incurred the debt? Check	State ZIP Code	When was the o	ou file, the claim is: Check all that apply.
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	ly s and another a community debt	Type of NONPR Student loan Obligations divorce that	arising out of a separation agreement or you did not report as priority claims nsion or profit-sharing plans, and other s

☐ Yes

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Debto			mber (if known) 22-15547
	First Name Middle Name	Last Name	
Part	2: Your NONPRIORITY Unsecured Claim	s - Continuation Page	
After	r listing any entries on this page, number them b	eginning with 4.5, followed by 4.6, and so forth.	Total claim
4.4	CREDIT UNION OF N J	Last 4 digits of account number	\$9,010.00
	Nonpriority Creditor's Name	When was the debt incurred?	_
	PO BOX 7921 Number Street	As of the date you file, the claim is: Check al	I that apply.
	Trenton, NJ 08628	☐ Contingent	,
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agr	roomant or
	☐ At least one of the debtors and another	divorce that you did not report as priority of	claims
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, a	and other
	Is the claim subject to offset?	similar debts	
	☑ No	Other. Specify Line of Credit	
	☐ Yes	Line of Credit	
46			\$1,046.00
4.5	CREDIT UNION OF N J Nonpriority Creditor's Name	Last 4 digits of account number	
	PO BOX 7921	When was the debt incurred?	_
	Number Street	As of the date you file, the claim is: Check al	I that apply.
	Trenton, NJ 08628	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agr	
	At least one of the debtors and another	divorce that you did not report as priority of	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, a similar debts	and other
	Is the claim subject to offset?	Other. Specify	
	√ No	Credit Card	
	☐ Yes		
4.6	Discover Bank	Last 4 digits of account number	\$2,803.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO BOX 30939	As of the date you file, the claim is: Check al	- I that apply
	Number Street	Contingent	τιτιατ αρριγ.
	Salt Lake City, UT 84130 City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	'	
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only		rooment or
	☐ At least one of the debtors and another	 Obligations arising out of a separation agonometric divorce that you did not report as priority 	
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, a	
	Is the claim subject to offset?	similar debts	
	☑ No	☑ Other. Specify Credit Card	
	☐ Yes	ordun Garu	

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Debto	r 1	Carolyn	<u>L</u>		ooks		Case number (if know	wn) 22-15547	
		First Name	Middle Name	Las	st Name				
Part	2: Your NO	ONPRIORITY	Unsecured Claims	- Conti	inuation	Page			
After	· listing any e	entries on this p	age, number them beg	ginning	with 4.5, fo	llowed by 4.6, and so for	rth.	Total clair	m
4.7	Discover B				Las	t 4 digits of account num	nber		\$6,701.00
	Nonpriority Cr				Whe	en was the debt incurred	?		
	PO BOX 30 Number	Street			— As o	of the date you file, the cl	laim is: Check all that apply		
		City, UT 84130				Contingent			
	City	, e : e : e : e	State ZIP Code			Unliquidated			
	Who incurre	ed the debt? Che	eck one.			Disputed			
	☑ Debtor 1	1 only				e of NONPRIORITY unse	cured claim:		
	☐ Debtor 2	2 only				Student loans			
	Debtor 1	1 and Debtor 2 o	nly		_		a separation agreement or		
	☐ At least	one of the debto	ers and another			divorce that you did not re	eport as priority claims		
	☐ Check if	f this claim is fo	r a community debt			Debts to pension or profit similar debts	t-sharing plans, and other		
		subject to offse	t?			Other. Specify			
	☑ No				_	Credit Card			
	☐ Yes								
4.8	Helix				l as	t 4 digits of account num	nber		\$1,300.00 <u></u>
	Nonpriority Cr	editor's Name				en was the debt incurred			
		ege Blvd, Suite	150				laim is: Check all that apply		
	Number	Street			_	Contingent	ann is. Oncok all that apply	•	
	City	Park, KS 66210	State ZIP Code			Unliquidated			
	Who incurre	ed the debt? Che	eck one.			Disputed			
	☑ Debtor 1	1 only					aurad alaim.		
	Debtor 2	2 only				e of NONPRIORITY unser Student loans	cured ciaim:		
	_	1 and Debtor 2 o	nlv						
	_	one of the debto	•			divorce that you did not re	a separation agreement or eport as priority claims		
			r a community debt			Debts to pension or profit	t-sharing plans, and other		
		subject to offse	•		⊴ í	similar debts			
	☑ No	•				Other. Specify Payday Loan			
	☐ Yes					. ayaay			
4.9	IDMCB - C	ard Services					.l		\$2,684.00
1.0		editor's Name				t 4 digits of account num			
	P.O. Box 15	5369				en was the debt incurred			
	Number	Street				-	laim is: Check all that apply	•	
	Wilmingtor City	n, DE 19850	State ZIP Code			Contingent			
	•	ed the debt? Che			_	Unliquidated			
	Debtor 1		scr one.			Disputed			
	Debtor 2	•				e of NONPRIORITY unse	cured claim:		
	_	•	nly			Student loans			
	_	1 and Debtor 2 o	-			Obligations arising out of divorce that you did not re	a separation agreement or		
		one of the debto				•	t-sharing plans, and other		
			r a community debt			similar debts	t onaining plants, and outer		
	Is the claim	subject to offse	τι			Other. Specify			
						Credit Card			
	Yes								

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Debto	r 1 Carolyn L	Brooks Case number (if known) 22-15547
	First Name Middle Name	Last Name	
Part :	2: Your NONPRIORITY Unsecured Claims	- Continuation Page	
After	listing any entries on this page, number them be	ginning with 4.5, followed by 4.6, and so forth.	Total claim
4.10	Onemain	Last 4 digits of account number	\$9,000.00
	Nonpriority Creditor's Name	•	
	PO Box 1010	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Evansville, IN 47706 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	Yes		
4.11	SyncB/Amazon	Last 4 digits of account number	<u>\$964.00</u>
	Nonpriority Creditor's Name	When was the debt incurred?	
	P.O. Box 960013 Number Street	As of the date you file, the claim is: Check all that apply.	
	Orlando, FL 32896	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts	
	☑ No	Other. Specify	
	☐ Yes	Charge Card	
			\$4,392.00
4.12	SyncB/Care Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$4,392.00
	PO Box 965036	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Orlando, FL 32896	Contingent	
	City State ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts ☑ Other Specify	
	☑ No	☑ Other. Specify Charge Card	
	☐ Yes		

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Debto	1 Carolyn L	Brooks Case number (if known) 2	2-15547
	First Name Middle Name	Last Name	
Part	Your NONPRIORITY Unsecured Claims - Co	ontinuation Page	
After	listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.13	SyncB/PPC Nonpriority Creditor's Name PO Box 530975 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card	\$3,548.00
4.14	SyncB/PPMC Nonpriority Creditor's Name PO BOX 965005 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card	<u>\$3,822.00</u>
4.15	Wells Fargo Nonpriority Creditor's Name P.O. Box 51193 Number Street Los Angeles, CA 90051 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	<u>unknown</u>

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Debtor 1	Carolyn	L	Brooks			Case number (if k	(nown) 22-15547
	First Name	Middle Name	Last Name				
Part 4: Add t	he Amounts for	Each Type of Unse	ecured Claim				
6. Total the an	nounts of certain ty be of unsecured cla	pes of unsecured cla	ms. This informati	ion is fo	r stat	istical reporting purposes only. 28	U.S.C. §159. Add the amounts
7,							
						Total alaba	
						Total claim	
Total claims	6a. Domestic su	pport obligations		6a.		\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government			6b.		\$600.00	
	6c. Claims for de were intoxica	while you	6c		\$0.00		
	6d. Other. Add all Write that am	Il other priority unsecur	ed claims.	6d.	+	\$0.00	
	6e. Total. Add lin	es 6a through 6d.		6e.		\$600.00	
						Total claim	
Total claims	6f. Student loans	5		6f.		\$0.00	
from Part 2		arising out of a separa r divorce that you did aims		6g.		\$0.00	
	6h. Debts to pen other similar	sion or profit-sharing debts	plans, and	6h.		\$0.00	
		other nonpriority unse that amount here.	cured	6i.	+	\$47,109.00	
	6j. Total. Add line	es 6f through 6i.		6j.		\$47,109.00	

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Fill in this information	n to identify your case:			
Debtor 1	Carolyn	L	Brooks	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bank	ruptcy Court for the:		District of New Jersey	
Case number (if known)	22-15547			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with whom you	have the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	e ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	e ZIP Code	

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				Document Pa	age 30 of 55	
Fill	in this information	n to identify your ca	se:			
D€	ebtor 1	Carolyn First Name	L Middle Name	Brooks Last Name		
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name		
l Ir	nited States Bankı	ruptcy Court for the	.	District of New Jersey	.v	
Ca	ase number known)	22-155	<u> </u>		Check if this is an amended filing	
	ficial Form					
Sc	chedule i	H: Your C	odebtors		12/1	5
toge in th	ther, both are equ	ually responsible f	or supplying corre	ct information. If more sp	Be as complete and accurate as possible. If two married people are filing space is needed, copy the Additional Page, fill it out, and number the entry Additional Pages, write your name and case number (if known). Answer	
1.		ny codebtors? (If	ou are filing a joint	case, do not list either sp	spouse as a codebtor.)	
	□No					
_	√ Yes					
2.		na, Nevada, New M		nity property state or terr , Texas, Washington, and	rritory? (Community property states and territories include Arizona, Californ d Wisconsin.)	a,
			spouse, or legal equ	uivalent live with you at th	the time?	
	□No	•		•		
	Yes. In w	which community st	ate or territory did y	ou live?	Fill in the name and current address of that person.	
	Name					
	Number	Street				
	City		State ZIP Co	de		
3.	again as a cod	lebtor only if that p	erson is a guarant	tor or cosigner. Make sur	debtor if your spouse is filing with you. List the person shown in line 2 are you have listed the creditor on <i>Schedule D</i> (Official Form 106D), Use <i>Schedule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.	
	Column 1: Your	codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1	Brooks, Ayla				Schedule D, line	
	Name	10			Schedule E/F, line 4.10	
	249 Hillcrest Av Number Stree	et			Schedule G, line	
	Trenton, NJ 086	S18 State	e ZIP Code			
3.2	Brooks Leon				☑ Schedule D, line 2.1	

Schedule E/F, line _____

☐ Schedule G, line —

Name

City

Number

249 Hillcrest Ave

Trenton, NJ 08618

Street

State

ZIP Code

Case 22-15547-CMG Doc 11 Filed 08/01/22 Entered 08/01/22 13:57:29 Desc Main Fill in this information to identify your case: Debtor 1 Carolyn **Brooks** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) Check if this is: First Name Middle Name Last Name An amended filing **District of New Jersey** United States Bankruptcy Court for the: ☐ A supplement showing postpetition 22-15547 Case number chapter 13 income as of the following date: (if known) MM / DD / YYYY Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, ☑ Employed ☐ Not Employed ☐ Employed ☐ Not Employed **Employment status** attach a separate page with information about additional Occupation Senior Accountant employers. **Employer's name** Trenton Water Works Include part time, seasonal, or self-employed work. **Employer's address** 333 Cortland St. #2 Occupation may include student Number Street Number Street or homemaker, if it applies. Trenton, NJ 08638 City State State Zip Code Zip Code How long employed there? 19 years Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$6,664.00 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00

\$6,664.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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		First Name Middle Name	Last Name				
					For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line	1 here	→	4.	\$6,664.00	\$0.00	
	List all pay	roll deductions:					
	5a. Tax, M	edicare, and Social Security deductions	5	5a.	\$1,091.00	\$0.00	
	5b. Manda	tory contributions for retirement plans		5b.	\$541.00	\$0.00	
	5c. Volunta	ary contributions for retirement plans		5c.	\$692.00	\$0.00	
	5d. Require	ed repayments of retirement fund loans	S	5d.	\$0.00	\$0.00	
	5e. Insurar	nce		5e.	\$613.00	\$0.00	
	5f. Domest	ic support obligations		5f.	\$0.00	\$0.00	
	5g. Union	dues		5g.	\$0.00	\$0.00	
	5h. Other o	deductions. Specify:		5h. +	\$0.00	+ \$0.00	
		yroll deductions. Add lines 5a + 5b + 5c +		6.	\$2,937.00	\$0.00	
	Calculate t	otal monthly take-home pay. Subtract li	ine 6 from line 4.	7.	\$3,727.00	\$0.00	
	List all oth	er income regularly received:					
	8a. Net inc	ome from rental property and from ope sion, or farm	erating a business,				
	receipts	a statement for each property and busin s, ordinary and necessary business expery net income.		8a.	\$0.00	\$0.00	
	8b. Interes	t and dividends		8b.	\$0.00	\$0.00	
		support payments that you, a non-filin dent regularly receive	g spouse, or a				
		alimony, spousal support, child support ent, and property settlement.	, maintenance, divorce	8c.	\$0.00	\$0.00	
	8d. Unemp	loyment compensation		8d.	\$0.00	\$0.00	
	8e. Social	Security		8e.	\$0.00	\$0.00	
	8f. Other o	government assistance that you regula	rly receive				
	assista	cash assistance and the value (if known nce that you receive, such as food stam mental Nutrition Assistance Program) or	ps (benefits under the				
	Specify	r:		8f.	\$0.00	\$0.00	
	8g. Pensio	n or retirement income		8g.	\$0.00	\$0.00	
	8h. Other r	nonthly income. Specify: Daughter pay started, Daug	hter receives	8h. +	\$600.00	+\$0.00	
		unemploymenter income. Add lines 8a + 8b + 8c + 8d	nt.) + 8e + 8f +8g + 8h.	9.	\$600.00	\$0.00	
		nonthly income. Add line 7 + line 9. tries in line 10 for Debtor 1 and Debtor 2	or non-filing spouse	10.	\$4,327.00	+ \$0.00 =	\$4,327
	State all ot	her regular contributions to the expens	ses that you list in Sche	edule J.			
	friends or r	ntributions from an unmarried partner, m elatives. ude any amounts already included in line	•		•		
	Specify:					11. +	\$0.
<u>.</u>	Add the an	nount in the last column of line 10 to th the Summary of Your Assets and Liabili				ncome. Write that	\$4,327
						-	Combined nonthly incom
	Do you expect an increase or decrease within the year after you file this form?						
	✓ No. ☐ Yes. Ex		e IRS for 2021 but got	a refund in	2020. Normally ther	e is very little (if any) refund	d.

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			Documer	nt Page 33 of 55			
Fill	in this information t	o identify your cas	e:				
D	ebtor 1	Carolyn	L Brooks				
		First Name	Middle Name Last Name	9	Check if this is:		
1	ebtor 2				An amended filir	ng	
(S	pouse, if filing)	First Name	Middle Name Last Name	e	A supplement shaper		
Uı	nited States Bankru	ptcy Court for the:	District of N	New Jersey	chapter 13 incor	me as of the following date:	
_	ase number known)	22-1554	47		MM / DD / YYYY	Y	
∟ Of	ficial Form	106J					
Sc	chedule J	: Your Ex	penses			1	12/15
			e. If two married people are filin this form. On the top of any ad				
_	•			iditional pages, write your nam	ne and case number	(ii kilowii). Aliswei every que	Suon.
	rt 1: Describe Y						
1.	Is this a joint case						
	No. Go to line 2						
	Yes. Does Debt	tor 2 live in a sepa	arate household?				
		Nehtor 2 must file (Official Form 106J-2, <i>Expenses</i>	for Sanarata Household of Deb	ntor 2		
2.				ior deparate ribuseriola of Dec	NOT Z.		
	Do not list Debtor		☐ No ☑ Yes. Fill out this information	Dependent's relationship	to Depende	ent's Does dependent live	!
	Debtor 2.		for each dependent		age	with you?	_
	Do not state the de names.	ependents'		Child	27	□ _{No.} ☑ _{Yes.}	
						—— No. ☐ Yes.	
						—— No. ☐ Yes.	
						No.	
						No. ☐ Yes.	
3.	, ,		✓No				
	expenses of peop yourself and your		□ _{Yes}				
		•					
Pa	rt 2: Estimate \	our Ongoing M	onthly Expenses				
			kruptcy filing date unless you a is a supplemental <i>Schedule J</i> ,				of a
			h government assistance if you n Schedule I: Your Income (Offi			Your expenses	
4.	The rental or home for the ground or lo		enses for your residence. Includ	le first mortgage payments and	I any rent 4.	\$1,196.00	
	If not included in I	ine 4:					

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4d. \$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4a.

4b.

\$0.00

\$0.00

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Debtor 1 Carolyn L Brooks Case number (if known) 22-15547
First Name Middle Name Last Name

	Yo	Your expenses	
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00	
5. Utilities:			
6a. Electricity, heat, natural gas	6a. —	\$295.00	
6b. Water, sewer, garbage collection	6b	\$65.00	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$106.00	
6d. Other. Specify: Cell Phone	6d	\$225.00	
Food and housekeeping supplies	7	\$595.00	
. Childcare and children's education costs	8.	\$0.00	
. Clothing, laundry, and dry cleaning	9	\$245.00	
Personal care products and services	10.	\$195.00	
Medical and dental expenses	11	\$50.00	
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$315.00	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$195.00	
4. Charitable contributions and religious donations	14.	\$0.00	
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a. —	\$0.00	
15b. Health insurance	15b	\$0.00	
15c. Vehicle insurance	15c	\$117.00	
15d. Other insurance. Specify:	15d	\$0.00	
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00	
	_		
7. Installment or lease payments:	17a.	\$275.00	
17a. Car payments for Vehicle 1	17b.	\$0.00	
17b. Car payments for Vehicle 2	17c.	\$0.00	
17c. Other. Specify:	 17d.		
17d. Other. Specify:		\$0.00	
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18	\$0.00	
9. Other payments you make to support others who do not live with you.	40	Фо оо	
Specify:	19. <u> </u>	\$0.00	
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.		
20a. Mortgages on other property	20a	\$0.00	
20b. Real estate taxes	20b	\$0.00	
20c. Property, homeowner's, or renter's insurance	20c	\$0.00	
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00	
20e. Homeowner's association or condominium dues	20e.	\$0.00	

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	Middle Name	Last Name	Case number (if known)
ther. Specify:			21. +	\$0.00
alculate your monthly exp	penses.			
2a. Add lines 4 through 21		22a	\$3,999.00	
2b. Copy line 22 (monthly	expenses for Debtor 2),	22b	\$0.00	
2c. Add line 22a and 22b.	The result is your month	22c	\$3,999.00	
alculate your monthly net	income.			
3a. Copy line 12 (your com	nbined monthly income)	23a. <u> </u>	\$4,327.00	
3b. Copy your monthly exp	enses from line 22c abo	23b. _	\$3,999.00	
3c. Subtract your monthly	expenses from your mor		400000	
The result is your mon	thly net income.	23c	\$328.00	
or example, do you expect	to finish paying for your	car loan within the year or do you exp	ect your	
22 21 22 22 22 23 33 33 33 33 33 33 33 33 33	Iculate your monthly expanded. Add lines 4 through 21 to. Copy line 22 (monthly co. Add line 22a and 22b.) Iculate your monthly net a. Copy line 12 (your compose. Copy your monthly expose. Subtract your monthly The result is your monthly out expect an increase of example, do you expect regage payment to increase. No. None	Iculate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), c. Add line 22a and 22b. The result is your month Iculate your monthly net income. a. Copy line 12 (your combined monthly income) b. Copy your monthly expenses from line 22c abo c. Subtract your monthly expenses from your mor The result is your monthly net income. you expect an increase or decrease in your expenses from your expenses from your expenses from your monthly net income.	Iculate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. Iculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I. b. Copy your monthly expenses from line 22c above. c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. you expect an increase or decrease in your expenses within the year after you file the rexample, do you expect to finish paying for your car loan within the year or do you expertgage payment to increase or decrease because of a modification to the terms of your No. None	Iculate your monthly expenses. a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. 22c. Iculate your monthly net income. a. Copy line 12 (your combined monthly income) from Schedule I. c. Copy your monthly expenses from line 22c above. c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. you expect an increase or decrease in your expenses within the year after you file this form? rexample, do you expect to finish paying for your car loan within the year or do you expect your ritgage payment to increase or decrease because of a modification to the terms of your mortgage? No. None

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Fill in this information	to identify your case	:		
Debtor 1	Carolyn	L	Brooks	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:		District of New Jersey	
Case number (if known)	22-15547	<u>, </u>		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

new Summary and check the box at the top of this page.	•
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$142,500.00 \$14,600.00 \$157,100.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$120,220.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$600.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$47,109.00
Your total liabilities	\$167,929.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,327.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,999.00

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				.9
Debtor 1	Carolyn	L	Brooks	Case number (if known) 22-15547
	First Name	Middle Name	Last Name	

Part -	4: Answer These Questions for Administrative and Statistical Records		
	you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the	e court with your other sched	ules.
☑	At kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 29 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (8). Fill out lines 8-9g for statistical purposes. 20 U.S.C. § 101 (J.S.C. § 159.	
B. Fro i Forr	n the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from n 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	Official	\$6,664.00
9. Cop	y the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
F	rom Part 4 on Schedule E/F, copy the following:		
9a	. Domestic support obligations (Copy line 6a.)	\$0.00	
9b	. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$600.00	
90	. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
90	. Student loans. (Copy line 6f.)	\$0.00	
9e	.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9g	. Total . Add lines 9a through 9f.	\$600.00	

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Fill in this information	to identify your case			
Debtor 1	Carolyn	L	Brooks	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:		District of New Jersey	
Case number (if known)	22-15547			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an att	orney to help you fill out hankruptcy forms?
✓ No	smey to help you lin out building forme.
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaration and that they are true and correct.
X /s/ Carolyn L Brooks	
Carolyn L Brooks, Debtor 1	
Date <u>08/01/2022</u>	
MM/ DD/ YYYY	

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Fill in this information	n to identify your case	:		
Debtor 1	Carolyn	L	Brooks	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		District of New Jersey	
Case number (if known)	22-15547	<u>, </u>		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

. What is your current marital status?				
☐ Married				
✓ Not married				
During the last 3 years, have you lived an	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	le where you live now.		
Within the last 8 years, did you ever live writories include Arizona, California, Idaho,				
Mo	Louisiana, Nevada, New Me	exico, Puerto Rico, Texas, vi	vasnington, and wisconsin.	.)
Yes. Make sure you fill out Schedule H.	· Vour Codobtors (Official Ed	orm 106H).		
Tes. Make sure you fill out <i>schedule</i> H.	. Tour Codebiors (Official FC			
ies. Make sure you fill out <i>scriedule i</i>	. Tour Codebiors (Official Fo			
	·	(33.1)		
	·			
art 2: Explain the Sources of Your I Did you have any income from employments.	Income ent or from operating a bus	iness during this year or th		vears?
art 2: Explain the Sources of Your I Did you have any income from employment in the total amount of income you receive	Income ent or from operating a bused from all jobs and all busine	iness during this year or the	ctivities.	vears?
Did you have any income from employme ill in the total amount of income you receive you are filing a joint case and you have income you have you have income you have income you have income you have you have income you have you hav	Income ent or from operating a bused from all jobs and all busine	iness during this year or the	ctivities.	vears?
Did you have any income from employment ill in the total amount of income you receive you are filling a joint case and you have income No	Income ent or from operating a bused from all jobs and all busine	iness during this year or the	ctivities.	/ears?
Did you have any income from employme ill in the total amount of income you receive you are filing a joint case and you have income you have you have income you have income you have income you have you have income you have you hav	ent or from operating a bus ed from all jobs and all busine ome that you receive togeth	iness during this year or the	ctivities. ebtor 1.	vears?
Did you have any income from employment ill in the total amount of income you receive you are filing a joint case and you have income No	Income ent or from operating a bused from all jobs and all busine	iness during this year or the	ctivities.	/ears?
Did you have any income from employmer ill in the total amount of income you receive you are filling a joint case and you have income No	ent or from operating a bus ed from all jobs and all busine ome that you receive togeth	iness during this year or the	ctivities. ebtor 1.	vears? Gross Income
Did you have any income from employment ill in the total amount of income you receive you are filing a joint case and you have income No	ent or from operating a bused from all jobs and all busing ome that you receive together. Debtor 1	iness during this year or the esses, including part-time a er, list it only once under De	ctivities. ebtor 1. Debtor 2	
Did you have any income from employment ill in the total amount of income you receive you are filing a joint case and you have income No	ent or from operating a bused from all jobs and all busine ome that you receive together the sources of income	iness during this year or the esses, including part-time a er, list it only once under De	Debtor 2 Sources of income	Gross Income (before deductions and

	Case 2	22-13347-CIVIG	Docume	nt Page 40 of !		.29 Desc Main
	calendar y	rear: ember 31, <u>2021</u>)	✓ Wages, commissions, bonuses, tips	\$68,148.00	Wages, commission bonuses, tips	ons,
(•ααα.	, 2000	YYYY	Operating a business		Operating a busine	ess
	-	ear before that:	✓ Wages, commissions, bonuses, tips	\$39,083.00	☐ Wages, commission bonuses, tips	ons,
		YYYY	Operating a business		Operating a busine	ess
nclude include	come regar efit payme	dless of whether that ints; pensions; rental in you have income that		s of other income are alimononey collected from laws	its; royalties; and gamblir	Security, unemployment, and otheng and lottery winnings. If you are
art 3: L	ist Certa.	in Payments You N	Made Before You Filed	for Bankruptcy		
. Are eith	er Debtor 1	I's or Debtor 2's debts	primarily consumer debts?	,		
☐ No.	an indivi	dual primarily for a per	has primarily consumer de sonal, family, or household p filed for bankruptcy, did you	ourpose."		(8) as "incurred by
	☐ No. G	So to line 7.				
	Yes.	paid that creditor. Do not include payments	itor to whom you paid a total not include payments for do s to an attorney for this bank 1/25 and every 3 years after	omestic support obligation cruptcy case.	s, such as child support a	nd alimony. Also, do
√ Yes.			ave primarily consumer de filed for bankruptcy, did you		\$600 or more?	
	☐ No. G	So to line 7.				
	√ Yes.		itor to whom you paid a total domestic support obligatior ankruptcy case.			
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Rocket M		4,5,6/2022	\$3,588.00	\$0.00	☑ Mortgage
		odward Avenue Street				☐ Credit card ☐ Loan repayment
	Detroit. M		Code			Suppliers or vendors
						■ Other

Case 22-15547-CMG Doc 11 Filed 08/01/22 Entered 08/01/22 13:57:29 Desc Main Page 41 of 55 Document Debtor 1 Carolyn **Brooks** Case number (if known) 22-15547 Last Name Middle Name First Name Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage CREDIT UNION OF N J 4.5.6/2022 \$825.00 \$0.00 **√** Car Creditor's Name ☐ Credit card PO BOX 7921 Number Street Loan repayment Trenton, NJ 08628 ☐ Suppliers or vendors ZIP Code City Other — 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **✓** No Yes. List all payments to an insider. 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **✓** No Yes. List all payments that benefited an insider. Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **✓** No ☐ Yes. Fill in the details. 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **☑** No Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **✓** No ☐ Yes

Page 42 of 55 Document Debtor 1 Carolyn **Brooks** Case number (if known) 22-15547 First Name Middle Name Last Name List Certain Gifts and Contributions Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√** No Yes. Fill in the details for each gift or contribution. List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **✓** No Yes. Fill in the details. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Jenkins & Clayman Person Who Was Paid Attorney's Fee \$685.00 7/2022 412 S. Whitehorse Pike Number Street Audubon, NJ 08106 City State ZIP Code Email or website address Person Who Made the Payment, if Not You

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Carolyn I Brooks Case number (if known) 22-15547

	Circt Name	Middle				
	First Name	Middle	Name Last Name			
Allen Credi	it and Debt Counse	eling	Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
Person Who						
						\$20.00
Number S	Street					
City	State Z	IP Code				
City	State 2	ir code				
Email or web	site address					
Person Who	Made the Payment, i	f Not You				
elp you deal o not include	l with your credito	rs or to ma	ruptcy, did you or anyone else acting ke payments to your creditors? you listed on line 16.	g on your behalf pay or	transfer any property	to anyone who promised to
√ No						
Yes. Fill	in the details.					
nclude both on the control of the co	rse of your busine outright transfers a	ess or finan nd transfer	kruptcy, did you sell, trade, or othervicial affairs? Is made as security (such as the granticave already listed on this statement.			
nclude both of not include No Yes. Fill 9. Within 10 These are off No Yes. Fill	rse of your busine butright transfers a gifts and transfer in the details. years before you ten called asset-print the details.	ess or finan nd transfers to that you h filed for ba rotection de	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any prope vices.)	ng of a security interest	t or mortgage on your p	property).
nclude both of not include No Yes. Fill 9. Within 10 These are off No Yes. Fill	rse of your busine butright transfers a gifts and transfer in the details. years before you ten called asset-print the details.	ess or finan nd transfers to that you h filed for ba rotection de	cial affairs? made as security (such as the granticave already listed on this statement.	ng of a security interest	t or mortgage on your p	property).
Principle of the control of the cont	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance rear before you file d? ting, savings, mone	ess or finan nd transfers is that you h filed for ba rotection de	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any prope vices.)	ng of a security interest rty to a self-settled trus t Boxes, and Storag	t or mortgage on your post or similar device of	which you are a beneficiary
Principle of the control of the cont	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance rear before you file d? ting, savings, mone	ess or finan nd transfers is that you h filed for ba rotection de	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any propervices.) Ints, Instruments, Safe Depositruptcy, were any financial accounts or other financial accounts; certificates	ng of a security interest rty to a self-settled trus t Boxes, and Storag	t or mortgage on your post or similar device of	which you are a beneficiary
nclude both of not include both of not include check unds, cooper of not not include check unds, cooper of not not include of not inc	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance rear before you file fired; catives, association	ess or finan nd transfers is that you h filed for ba rotection de	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any propervices.) Ints, Instruments, Safe Depositruptcy, were any financial accounts or other financial accounts; certificates	ng of a security interest rty to a self-settled trus t Boxes, and Storag	t or mortgage on your post or similar device of	which you are a beneficiary
nclude both of not include both of not include check unds, cooper of not not include check unds, cooper of not not include of not inc	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance rear before you file d? ting, savings, mone	ess or finan nd transfers is that you h filed for ba rotection de	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any propervices.) Ints, Instruments, Safe Depositruptcy, were any financial accounts or other financial accounts; certificates	ng of a security interest rty to a self-settled trus t Boxes, and Storag	t or mortgage on your post or similar device of	which you are a beneficiary
nclude both of not include both of not include both of not include with the notation of the no	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance trear before you file ing, savings, mone atives, association in the details.	ess or finan nd transfers is that you h filed for ba cial Accor ed for bank ey market, as, and other	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any propervices.) Ints, Instruments, Safe Depositruptcy, were any financial accounts or other financial accounts; certificates	ng of a security interest rty to a self-settled trus t Boxes, and Storag or instruments held in y s of deposit; shares in b	ge Units your name, or for your anks, credit unions, bro	which you are a beneficiary benefit, closed, sold, move okerage houses, pension
nclude both of not include both of not include both of not include and include and include are seen are of a large and a large are seen	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance trear before you file ing, savings, mone atives, association in the details.	ess or finan nd transfers is that you h filed for ba cial Accor ed for bank ey market, as, and other	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any properties.) Ints, Instruments, Safe Depositives, were any financial accounts or other financial institutions.	ng of a security interest rty to a self-settled trus t Boxes, and Storag or instruments held in y s of deposit; shares in b	ge Units your name, or for your anks, credit unions, bro	which you are a beneficiary benefit, closed, sold, move okerage houses, pension
nclude both of not include both of not include both of not include and include and include and include and include checkunds, cooper and No are selected and include checkunds, cooper and No are aluables?	rse of your busines butright transfers a e gifts and transfer in the details. years before you ten called asset-pr in the details. Certain Finance trear before you file ing, savings, mone atives, association in the details.	ess or finan nd transfers is that you h filed for ba cial Accor ed for bank ey market, as, and other	cial affairs? Is made as security (such as the granticave already listed on this statement. Inkruptcy, did you transfer any properties.) Ints, Instruments, Safe Depositives, were any financial accounts or other financial institutions.	ng of a security interest rty to a self-settled trus t Boxes, and Storag or instruments held in y s of deposit; shares in b	ge Units your name, or for your anks, credit unions, bro	which you are a beneficiary benefit, closed, sold, move okerage houses, pension

Case 22-15547-CMG Doc 11 Filed 08/01/22 Entered 08/01/22 13:57:29 Desc Main Page 44 of 55 Document **Brooks** Debtor 1 Carolyn Case number (if known) 22-15547 Last Name First Name Middle Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **√** No Yes. Fill in the details. Give Details About Environmental Information Part 10: For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **√**No \square Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **√**No Yes. Fill in the details.

	Case 22-1554	7-CMG Doc		/22 Ente Page 45 c	ered 08/01/22 13:57:29 Desc Main	
Debtor 1	Carolyn	L	Brooks	1 age +5 c	Case number (if known) 22-15547	
	First Name	Middle Name	Last Name	_		_
Part 11: 0	Give Details Abou	t Your Business o	or Connections to An	y Business		
27. Within	4 years before you fi	led for bankruptcy, d	id you own a business o	r have any of th	he following connections to any business?	
	A sole proprietor or se	If-employed in a trade	e, profession, or other acti	ivity, either full-t	time or part-time	
	A member of a limited	liability company (LL	C) or limited liability partn	ership (LLP)		
	A partner in a partners	ship				
	An officer, director, or	managing executive	of a corporation			
	An owner of at least 5	% of the voting or equ	uity securities of a corpora	ation		
√ No. N	lone of the above app	lies. Go to Part 12.				
Yes. 0	Check all that apply a	bove and fill in the de	tails below for each busin	ess.		
	2 years before you fi or other parties.	led for bankruptcy, d	id you give a financial st	atement to any	rone about your business? Include all financial institutions,	
✓ No	or other purites.					
_	Fill in the details below	v				
	III III tilo dotalio bolov	••				
5 J 16 J						
Part 12: \$	Sign Below					
and correc	t. I understand that r	naking a false staten	nent, concealing property	, or obtaining ı	declare under penalty of perjury that the answers are true money or property by fraud in connection with a poth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
Sign	Carolyn L Brooks Pature of Carolyn L Brooks Pature 08/01/2022	ooks, Debtor 1				
		_				
Did you att	tach additional pages	s to your Statement o	of Financial Affairs for Inc	dividuals Filing	for Bankruptcy (Official Form 107)?	
Yes						
	ay or agree to pay so	meone who is not an	attorney to help you fill o	out bankruptcy	y forms?	
√ No					Attach the Bankruptcy Petition Preparer's Notice,	
☐ Yes. N	Name of person ——				Declaration, and Signature (Official Form 119).	

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Fill in this information	to identify your case:			
Debtor 1	Carolyn	L	Brooks	_
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:		District of New Jersey	_
Case number	22-15547			
(if known)				

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
√1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☑ 3. The commitment period is 3 years.
☐4. The commitment period is 5 years.
Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

- . What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and c payroll deductions).	\$6,664.00			
3.	Alimony and maintenance payments. Do not include payments.	\$0.00			
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.			\$0.00	
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	\$0.00	\$0.00		
	Net monthly income from a business, profession, or farm	\$0.00	Ψ0.00	Copy nere →\$0.00	
6.	Net income from rental and other real property	Debtor 1	Debtor 2		
	Gross receipts (before all deductions)	\$0.00	\$0.00		
	Ordinary and necessary operating expenses	\$0.00	\$0.00		
	Net monthly income from rental or other real property	\$0.00	Ψ0.00	Copy nere → \$0.00	

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Debtor 1 Carolyn Case number (if known) 22-15547 **Brooks** First Name Middle Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse 7. Interest, dividends, and royalties \$0.00 \$0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you..... \$0.00 For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a benefit \$0.00 under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Daughter paying "rent" (Just started, Daughter receives \$0.00 unemployment.) Total amounts from separate pages, if any. \$6.664.00 \$6.664.00 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Total average monthly income Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$6,664.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$0.00 \$0.00 Total..... Copy here. \rightarrow 14. Your current monthly income. Subtract the total in line 13 from line 12. \$6,664.00

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Debtor 1	Carolyn		rooks	Case number (if known) 22-1	Case number (if known) 22-15547	
	First Name		ast Name			
		hly income for the year. Follo	·		#C CC4 00	
·					\$6,664.00	
Mult	tiply line 15a by 12 (the number of months in a yea	ar).		x 12	
15b. The	e result is your curre	ent monthly income for the yea	r for this part of the fo	orm	\$79,968.00	
16. Calculate	the median family	income that applies to you. F	ollow these steps:			
16a. Fill	in the state in which	n you live.	New .	Jersey		
16b. Fill	in the number of pe	ople in your household.		2		
16c. Fill	in the median family	/ income for your state and siz	e of household		\$92,669.00	
		le median income amounts, go . This list may also be availabl				
17. How do t	he lines compare?					
_{17a.} 🔽	Line 15b is less th U.S.C. § 1325(b)(nan or equal to line 16c. On the	e top of page 1 of this	s form, check box 1, <i>Disposable income is not detern</i> or <i>Disposable Income</i> (Official Form 122C–2).	nined under 11	
17b. 🖵	1325(b)(3). Go to			eck box 2, <i>Disposable income is determined under</i> 1: Income (Official Form 122C–2). On line 39 of that form		
Part 3: Cald	•	mitment Period Under 1	1 U.S.C. §1325(b)	(4)		
18. Copy voi	ır total average moı	nthly income from line 11.			\$0.004.00	
					\$6,664.00	
calculatin				ot filing with you, and you contend that educt part of your spouse's income, copy the		
19a. If the	marital adjustment	does not apply, fill in 0 on line	19a		- \$0.00	
19b. Subtr	ract line 19a from lin	ne 18.			\$6,664.00	
20. Calculate	your current mont	hly income for the year. Follo	w these steps.			
20a. Copy I	ine 19b				\$6,664.00	
Multip	ly by 12 (the numbe	r of months in a year).			x 12	
20b. The re	sult is your current r	monthly income for the year fo	r this part of the form	L.	\$79,968.00	
20c. Copy t	he median family in	come for your state and size o	f household from line	e 16c	\$92,669.00	
21. How do t	he lines compare?					
☑ Line 20	b is less than line 20	Oc. Unless otherwise ordered I 3 years. Go to Part 4.	by the court, on the to	op of page 1 of this form, check box 3,		
Line 20	b is more than or ed	•	rise ordered by the coart 4.	ourt, on the top of page 1 of this form,		
Part 4: Sigr	n Below					
By signing	here, under penalty	of perjury I declare that the ir	formation on this sta	tement and in any attachments is true and correct.		
X /s	/ Carolyn L Brooks	.				
· -	nature of Debtor 1	-				
Da	to 08/01/2022					
Da	te <u>08/01/2022</u> MM/ DD/ YYYY					
If you ched	cked 17a, do NOT fi	ll out or file Form 122C–2.				
			form. On line 39 of th	at form, copy your current monthly income from line	14 above.	

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IN THE UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY TRENTON DIVISION

IN RE: **Brooks, Carolyn L** CASE NO 22-15547

CHAPTER 13

			VERIFICATION OF CREDITOR MATRIX
The a	above named Debto	r hereby verifies that the	e attached list of creditors is true and correct to the best of his/her knowledge.
Date _	08/01/2022	Signature	/s/ Carolyn L Brooks
			Carolyn L Brooks, Debtor

American Web Loan 2128 N 14th St STE 1 Ponca City OK 74601

BEST BUY CBNA PO BOX 6497 Sioux Falls SD 57117

Ayla Brooks 249 Hillcrest Ave Trenton NJ 08618

Leon Brooks 249 Hillcrest Ave Trenton NJ 08618

Capital One PO Box 31293 Salt Lake City UT 84131

CREDIT UNION OF N J PO BOX 7921 Trenton NJ 08628

Discover Bank PO BOX 30939 Salt Lake City UT 84130

Helix 11225 College Blvd Suite 150 Overland Park KS 66210 IRS PO Box 7346 Philadelphia PA 19101

Jenkins Clayman 412 S Whitehorse Pike Audubon NJ 08106

JPMCB Card Services PO Box 15369 Wilmington DE 19850

Onemain PO Box 1010 Evansville IN 47706

Rocket Mortgage 1050 Woodward Avenue Detroit MI 48226

SyncBAmazon PO Box 960013 Orlando FL 32896

SyncBCare Credit PO Box 965036 Orlando FL 32896

SyncBPPC PO Box 530975 Orlando FL 32896

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SyncBPPMC PO BOX 965005 Orlando FL 32896

Wells Fargo PO Box 51193 Los Angeles CA 90051

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UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY		
Caption in Compliance with D.N.J. LBR 9004-1(b)		
Jenkins & Clayman		
412 S. Whitehorse Pike		
Audubon, NJ 08106		
Phone: (856) 546-9696		
Email: mail@jenkinsclayman.com Attorney for Debtor		
In Re:	Case No.: 22-15547	
Brooks, Carolyn L	Ohantan 40	
2.00.00, 00.00,002	Chapter: 13	
	Judge:	
Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P	13 DEBTOR'S ATTORNEY COMPENSATION 2. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation tion, or agreed to be paid to me, for services rendered or to be rendered on behalf billows:	
✓ Under D.N.J. LBR 2016-5(b), I have agreed to ac	ccept for all legal services required to confirm a plan, subject to the exclusions	
listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$4,750.00 I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses.		
Legal services on behalf of the debtor in connection with the following are not included in the flat fee:		
Representation of the debtor in:		
 adversary proceedings, 		
• loss mitigation/loan modification efforts,		
 post-confirmation filings and matters bro 	ought before the Court.	
I have received:	\$685.00	
The balance due is:	\$4,065.00	

The balance $\mathbf{\Delta}$ will $\mathbf{\Box}$ will not be paid through the plan.

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	of			nembers of my firm that may provide services to this client range from nd that I must receive the Court's approval of any fees or expenses to be	Δ.
	paid to me in this		on pursuant to D.N.J. LBR 20		C
	I have re	eceived:			
2.	The source of the	funds paid to n	ne was:		
	✓ Debtor(s)	Other (specify below)		
					_
3.	If a balance is due	e, the source of	future compensation to be pa	aid to me is:	
	✓ Debtor(s)	☐ Other (specify below)		
_		ion with a perso	· ·	another person(s) unless they are members of my law firm. If I have my law firm, a copy of that agreement and a list of the people sharing	n
	If possible, Debtor'	s counsel will a	dvise Debtor(s) of the use of o	hearings on their behalf in lieu of counsel retained by Debtor(s) as coverage counsel for any hearings prior to that hearing. Debtor(s) and may or may not be compensated for their appearance.	
			/s/ CB		
			Debtor(s) Initials	Debtor(s) Initials	
as need		=	=	appear at hearings on their behalf in lieu of counsel retained by Debtor e by me, the undersigned attorney, or members of my law firm.	(s)
			Debtor(s) Initials	Debtor(s) Initials	

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Date:	08/01/2022	/s/ Carolyn L Brooks	
	_	Debtor	
Date:			
		Joint Debtor	
Date:	08/01/2022	/s/ Jeffrey E. Jenkins	
		Debtor's attorney	

6.

The Debtor(s) have reviewed this Disclosure and it is consistent with the terms of the Retainer Agreement.